

Class registration - Description	ITEM NUMBER (4-DIGITS)	Start Date	End Date	Price
E.				

Which race(s) do you consider yourself to be? (Optional) (Mark up to two boxes)

- | | | | |
|--|---|--|---|
| <input type="checkbox"/> Alaska Native (015) | <input type="checkbox"/> Cambodian (604) | <input type="checkbox"/> Indonesian (610) | <input type="checkbox"/> Samoan (655) |
| <input type="checkbox"/> American Indian (597)* | <input type="checkbox"/> Chinese (605) | <input type="checkbox"/> Japanese (611) | <input type="checkbox"/> Taiwanese (606) |
| <input type="checkbox"/> Arabian (801) | <input type="checkbox"/> Eskimo (935) | <input type="checkbox"/> Korean (612) | <input type="checkbox"/> Thai (618) |
| <input type="checkbox"/> Asian, Indian (600) | <input type="checkbox"/> Fijian (676) | <input type="checkbox"/> Nepali (635) | <input type="checkbox"/> Tlingit (017) |
| <input type="checkbox"/> Asian, Other (621) | <input type="checkbox"/> Filipino (608) | <input type="checkbox"/> Pacific Islander, Other (681) | <input type="checkbox"/> Vietnamese (619) |
| <input type="checkbox"/> Black or African American (872) | <input type="checkbox"/> Hawaiian, Native (653) | <input type="checkbox"/> Pakistani (616) | <input type="checkbox"/> White (800) |

F. Other Race: _____

* If American Indian, please list name of enrolled or principal tribe: _____

Are you of Spanish/Hispanic origin? (Optional) (Please mark only one box)

- | | | |
|---|---|---|
| <input type="checkbox"/> No, (not Spanish/Hispanic) (999) | <input type="checkbox"/> Yes, Mexican, Mexican-Am., Chicano (722) | <input type="checkbox"/> Yes, Spanish (731) |
| <input type="checkbox"/> Yes, Central American (704) | <input type="checkbox"/> Yes, Puerto Rican (727) | |
| <input type="checkbox"/> Yes, Cuban (709) | <input type="checkbox"/> Yes, South American (729) | |
| <input type="checkbox"/> Yes, other Spanish/Hispanic: _____ | | |

How long do you plan to attend Edmonds Community College?

- | | |
|--|--|
| <input type="checkbox"/> One quarter (11) | <input type="checkbox"/> Up to two years, no degree planned (14) |
| <input type="checkbox"/> Two quarters (12) | <input type="checkbox"/> Long enough to complete a degree (15) |
| <input type="checkbox"/> One year (13) | <input type="checkbox"/> Don't know (16) |

What is your current work status while attending college?

- | | |
|--|--|
| <input type="checkbox"/> Full-time homemaker (11) | <input type="checkbox"/> Part-time on campus (14) |
| <input type="checkbox"/> Full-time employment (including self and military) (12) | <input type="checkbox"/> Not employed, but seeking employment (15) |
| <input type="checkbox"/> Part-time off-campus (13) | <input type="checkbox"/> Not employed, not seeking employment (16) |

G. **What is your prior level of education at entry to Edmonds Community College?**

- | | |
|---|---|
| <input type="checkbox"/> Less than high school graduation (11) | <input type="checkbox"/> Certificate (less than two years) (15) |
| <input type="checkbox"/> GED (12) | <input type="checkbox"/> Associate degree (16) |
| <input type="checkbox"/> High school graduate (13) | <input type="checkbox"/> Bachelor's degree or above (17) |
| <input type="checkbox"/> Some post high school, but no degree or certificate (14) | |

What was your family status when you started at Edmonds Community College?

Were you...

- | |
|--|
| <input type="checkbox"/> a single parent with children or other dependents in your care (11) |
| <input type="checkbox"/> a couple with children or other dependents in your care (12) |
| <input type="checkbox"/> without children or other dependents in your care (13) |

Note: If you wish to take college classes that are not part of the BTC/WATR program, you will need to complete a new college admission application.

H. I hereby certify under penalty of perjury under the laws of the state of Washington RCW 9A.72.085 that to the best of my knowledge, all statements on this form are true and correct.

Signature: _____ **Date:** _____

OFFICE USE ONLY

SSN/NAME CHECK	RESIDENCY CODE	FEE PAY STATUS	LETTER GIVEN	DATE ENTERED	ENTERED BY	AUDITED DATE	AUDITED BY
	2	02	N/A				

Print Name: _____ **Student ID Number** _____ - _____ - _____